



Governor's Office on Service and Volunteerism

Martin O'Malley, *Governor*

Anthony G. Brown, *Lt. Governor*

2012 AmeriCorps*State Planning Grant APPLICATION INSTRUCTIONS

**Deadline for eGrants Submission to the
Governor's Office on Service and Volunteerism:**

April 13, 2012, 5:00 p.m. EST

**OMB Control #: 3045-0047
Expiration Date: 5/31/2013**

TABLE OF CONTENTS

Notice from the Corporation for National and Community Service.....	3
Notice from the Maryland Governor's Office on Service and Volunteerism	4
Funding Opportunity Detail.....	6
Maryland Priority Funding Initiatives	7
National Priority Focus Areas.....	7
Timeline for Maryland AmeriCorps*State Formula Grant Process	10
Application Deadline and Supporting Information.....	11
Types of Formula Grant Applications	12
Recommendations for Writing an AmeriCorps Grant Application	13

AmeriCorps Program Planning Grant Applications:

Electronic Grant Submission Components and Instructions	15
I. Applicant Info.....	16
II. Application Info	16
III. Narratives.....	16
IV. Performance Measures.....	18
V. Documents	18
VI. Budget.....	19
VII. Review, Authorize, and Submit	23
VIII. Survey on Ensuring Equal Opportunity for Applicants (Optional)	24

ATTACHMENTS

A: SF-424 Facesheet	
(eGrants Applicant Info and Application Info Sections)	25
B: Program Model, Design, Location, and Focus (eGrants Applicant Info Section)	29
C: Service Categories (eGrants Performance Measures Section).....	32
D: Performance Measure Worksheet	34
E: Assurances and Certifications (eGrants Authorize and Submit Section).....	36
F: Budget Worksheet	43
G: Budget Checklist.....	47
H: Survey on Ensuring Equal Opportunity for Applicants	49

NOTICE FROM THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

These application instructions conform to the Corporation for National and Community Service's (CNCS or the Corporation) online grant application system called eGrants. The eGrants system is designed to serve CNCS applicants and grantees. All CNCS funding announcements are posted on www.nationalservice.gov and at www.grants.gov.

Public Burden Statement: The Paperwork Reduction Act of 1995 requires CNCS to inform all potential persons who are to respond to this collection of information that such persons are not required to respond unless it displays a currently valid OMB control number (See 5 CFR 1320.5(b)(2)(i)).

Time Burden: The time required to complete this collection of information is estimated to average 40 hours per applicant. (GOSV Note: This estimate is for submission of the application in eGrants only. Program development, budget and evaluation planning, and grant writing will take significantly more time.)

Use of Information: The information collected constitutes an application to CNCS for grant funding. CNCS evaluates the application and makes funding decisions through its federal grant review and selection process.

Effects of Non-Disclosure: Providing this information is voluntary; however, failure to provide the information would not allow CNCS to assess the applicant's request for funding. In this case, it will not be possible to consider granting funds to the applicant.

Privacy Act: Information provided for this collection may be shared with federal, state, and local agencies for law enforcement purposes.



NOTICE FROM THE MARYLAND GOVERNOR'S OFFICE ON SERVICE AND VOLUNTEERISM

Authority

The Governor's Office on Service and Volunteerism (GOSV) acts as the State Service Commission and state funding agency for federal funds awarded by the Corporation for National and Community Service (CNCS) in accordance with the National and Community Service Trust Act of 1993 (42 U.S.C. §§12571-12595) to eligible entities for the purpose of planning or operating an AmeriCorps program.

Method of Submission

Applications to the GOSV for this funding opportunity must be submitted through eGrants, the CNCS online grant system. This document includes instructions for entering applications into the eGrants system. All elements of the application should be written and saved as word processing documents by the applicant; once they are finalized (and character limits confirmed), they should then be copied and pasted into the eGrants system by the submission deadline.

Universal Identifier and CCR

Applications must include a Dun and Bradstreet Data Universal Numbering System (DUNS) number. The DUNS number is an identifier that helps the federal government improve statistical reports on federal grants and cooperative agreements. The DUNS number does not replace your Employer Identification Number. DUNS numbers may be obtained at no cost by calling the DUNS number request line at 866-705-5711 or by applying online at www.dnb.com.

The Central Contractor Registry (CCR) is the primary registrant database for the U.S. Federal Government. CCR collects, validates, stores, and disseminates data in support of federal agency contracts, grant awards, cooperative agreements, and other forms of federal assistance. In order to apply for CNCS funding, you must register in the CCR. You can register online at <http://www.ccr.gov>. Registration takes approximately one hour to complete, depending on the size of your organization. Before you begin, you must have a DUNS number.

To complete the registration process, you will need to submit detailed information on your organization in various categories relevant to federal procurement and financial transactions:

- General Information, such as organization name, EIN, DUNS, location, income, and number of employees.
- Corporate Information, such as organization type (i.e., state government, nonprofit).
- Financial Information, such as financial institution, bank account numbers, and credit card information.
- Point of Contact Information, such as primary and alternate points of contact.

Specific requirements and detailed instructions on how to register are available in the CCR User's Guide (<https://www.bpn.gov/ccr/handbook.aspx>). You should review the guide before you begin the registration process as it identifies the required fields and will help you gather the necessary information.

Once you complete the CCR registration, it will take up to five business days to validate and process your information. You will receive an email notice from CCR when the registration becomes active. This is a one-time registration. However, you must update or renew your registration at least once per year to maintain an active status. CCR will send you a renewal reminder 30 days before your registration expires with instructions for completing the renewal process.

Agency Contact

Inquiries about this funding opportunity should be directed to Julie Mendez, Outreach Coordinator, Maryland Governor's Office on Service and Volunteerism, jmendez@gosv.state.md.us.

FUNDING OPPORTUNITY DETAIL

Subject to federal appropriations for the Corporation for National and Community Service (CNCS), the Governor's Office on Service and Volunteerism (GOSV) announces the availability of AmeriCorps funding to award to eligible organizations to conduct planning activities related to AmeriCorps program development.

State Agency Name: Governor's Office on Service and Volunteerism (GOSV)

Department: Executive

Instrument Type: Grant

Funding Opportunity Title: AmeriCorps*State Formula Funding

Posted Date: February 7, 2012

Notice of Intent to Apply due date: N/A

Application due date: April 13, 2012 / 5:00 p.m. EST

Application Submission Format: Electronic

Funding Notifications: The GOSV will announce the results of the AmeriCorps funding competition no later than June 30, 2012.

Grant Period: September 15, 2012 – August 31, 2013

Projected Grant Award Date: August 2012, but dependent on federal funding

Expected Number of Awards: Dependent on federal funding

Estimated Total Award for Planning Grants: \$25,000 (no AmeriCorps member positions)

Matching Requirement: 24%

Eligible Applicants: Public or private nonprofit organizations, including labor organizations; faith-based and other community organizations; schools or school districts; institutions of higher education; government entities within states or territories (e.g., cities, counties); Indian Tribes; or partnerships or consortia of the above, including applicants that have never received funding from GOSV or AmeriCorps are eligible to apply. Intermediary organizations intending to re-allocate resources locally are also encouraged to apply for grants described in these *Instructions*. Any organization described in Section 501(c)(4) of the Internal Revenue Code of 1986, 26 U.S.C. 501(c)(4) that engages in lobbying activities is not eligible to apply, serve as a host site for member placements, or act in any type of supervisory role in AmeriCorps programs. An organization that currently operates a CNCS-funded program or is applying for other Corporation funding is an eligible applicant; however, the same project cannot be funded by multiple AmeriCorps grants. If you have more than one application pending before GOSV and/or CNCS for the same project, you must state this fact in each application. You will be required to withdraw all but one if two or more are approved for funding.

MARYLAND PRIORITY FUNDING INITIATIVES

In allocating funding, the GOSV will give special consideration to projects that address one or a combination of the following Maryland priorities, listed below, that meets critical needs of the state, achieve national service goals, and address community problems:

- 1) Security—projects that reduce violent crime, protect women and children, improve homeland security across the state
- 2) Skills—projects that create jobs, improve student achievement and skill levels, improve marketable skills of Maryland’s workforce
- 3) Sustainability—projects that accelerate Chesapeake Bay restoration efforts, increase use of public transportation, decrease electric consumption, increase renewable energy sources, reduce Green-house gas emissions
- 4) Health—projects that end childhood hunger, reduce infant mortality, expand access to substance abuse treatment

NATIONAL PRIORITY FOCUS AREAS

Applicants for AmeriCorps funding must address one or a combination of the national service priority focus areas, objectives, and performance measures of the Corporation for National and Community Service (CNCS). The priority area is identified in bold below, and programs must provide at least one of the impact objectives listed after the issue area. This is a requirement for AmeriCorps funding, and these priority areas have changed since 2009.

In addition, priority will be given in AmeriCorps funding decisions for programs that address and have a strong track record in meeting the national performance measures (particularly disaster services, veterans & military families, and education). Performance measures are specific program goals and benchmarks that must be established, tracked, and reported during the AmeriCorps program and grant year. Examples of the national measures follow each funding area. For most measures, CNCS will offer a standard definition of program structure, level of interaction required, and other criteria to meet the measure.

For extensive information on CNCS funding goals, performance objectives, strategies, and priority measures, you can find the CNCS Strategic Plan at www.nationalservice.gov/pdf/11_0203_cnsc_strategic_plan.pdf. In addition, applicants should thoroughly review the detailed instructions on CNCS performances measures at http://www.americorps.gov/for_organizations/funding/nofa_detail.asp?tbl_nofa_id=91.

Priority funding areas in alphabetical order:

1. **Disaster Services:** the CNCS overall goal is to fund programs that build the capacity of national service network organizations to help their states and localities prepare, respond, recover and mitigate disasters, and increase community resiliency.

Examples of national performance measures: number of individuals that received CNCS-supported services in disaster preparedness, response, recovery, and/or mitigation.

2. **Economic Opportunity:** the CNCS overall goal is to fund programs that provide, support, and/or facilitate access to services and resources that contribute to the improved economic well-being and security of economically disadvantaged people.

Examples of national performance measures: number of economically disadvantaged individuals, including homeless individuals, receiving housing services or transitioned into safe, healthy, and affordable housing.

3. **Education:** the CNCS overall goal is to fund programs that provide, support, and/or facilitate access to services and resources that contribute to improved educational outcomes for economically disadvantaged people, especially children.

Examples of national performance measures: number of children demonstrating gains in school readiness in terms of social and/or emotional development, literacy skills, math skills; number of students with improved academic performance in literacy and/or math; number of students with improved school attendance.

4. **Environmental Stewardship:** the CNCS overall goal is to fund programs that provide direct services that contribute to increased energy and water efficiency, renewable energy use, or improving at-risk ecosystems, and support increased citizen behavioral change leading to increased efficiency, renewable energy use, and ecosystem improvements particularly for economically disadvantaged households and economically disadvantaged communities.

Examples of national performance measures: number of acres of parks or other public and tribal lands that are improved; number of housing units of low-income households and structures weatherized and retrofitted to significantly improve energy efficiency.

5. **Healthy Futures:** the CNCS overall goal is to fund programs that provide direct services that enable seniors to remain in their own homes with the same or improved quality of life for as long as possible; increase physical activity and improve nutrition in youth with the purpose of reducing childhood obesity; and improve access to primary and preventive health care.

Examples of national performance measures: number of homebound or older adults and individuals with disabilities receiving food, transportation, or other services that allow them to live independently; number of individuals receiving support, services, education, and/or referrals to alleviate long-term hunger.

6. **Veterans & Military Families:** the CNCS overall goal is to demonstrate the potential for CNCS-supported, national service interventions to positively impact the quality of life of veterans and improve military family strength.

Examples of national performance measures: number of active duty military or veterans receiving CNCS-support assistance; number of active duty military, veterans, or family members engaged in service opportunities as National Service Participants or as community volunteers.

TIMELINE FOR 2012 MARYLAND AMERICORPS*STATE PLANNING GRANT PROCESS

February 7, 2012	Release Maryland AmeriCorps*State Planning Grant Application Instructions
April 13, 2012	All applications for funding due to GOSV via eGrants
April 13 – 20, 2012	GOSV staff intake
April 30, 2012	Tentative: peer reviewer orientation; distribute review packets
May 3 – 19, 2012	Grant review period
May 18, 2012	Tentative: peer review consensus meeting
May 24, 2012	Clarification questions and required revisions to applicants
June 14, 2012	Governor's Commission on Service and Volunteerism meeting and vote on formula applications
June 15 – 22, 2012	Final clarifications or information needed (if necessary)
June 30, 2012	GOSV grant decisions announced
Summer 2012	CNCS and GOSV negotiations with applicants; revisions due in eGrants as requested
July - September 2012	Distribution of grant award packets; award date varies depending on CNCS funding and award processes
September 15, 2012	Commencement of planning grant period

APPLICATION DEADLINE AND SUPPORTING INFORMATION

The deadline for submission to the Governor's Office on Service and Volunteerism (GOSV) for this Formula competition in Maryland is **April 13, 2012, at 5:00 p.m. EST**. Applications must be submitted via eGrants, the CNCS online grant system. If there are extenuating circumstances that make this electronic submission impossible, contact the GOSV immediately; arrangements for hard copy submission on or before the deadline may be available. Late applications will not be accepted.

Follow the application structure and instructions provided in this document exactly and completely. Do not submit any supplementary materials such as videos, brochures, letters of support, or any other item not requested in these application instructions. The GOSV will not review or return them.

You are strongly encouraged to create your eGrants account and begin your application as soon as eGrants allows data to be entered. You should begin pasting your application into eGrants no later than 10 days before the deadline. This will allow you to address technical issues prior to the deadline for submission. Technical difficulties with the online system may occur, and these can cause lengthy delays for grant applicants.

In case of technical difficulties: Contact the eGrants Help Desk at 800-942-2677 (talk to an associate or leave a detailed message) or go to <http://www.nationalservice.gov/questions> (click Ask a Question) immediately if a problem arises while you are creating your account, preparing, or submitting your application. Be prepared to provide your application ID. If technical issues are preventing you from submitting your application in eGrants by the deadline, you must contact the eGrants Help Desk prior to the April 13, 2012, 5:00 p.m. EST deadline to explain your technical issue and get a ticket number. If your issue cannot be resolved by the deadline, you must continue working with the eGrants Help Desk to submit your application electronically. In addition, send an email to jmendez@gosv.state.md.us to notify the GOSV that you are submitting an application no later than the posted deadline. Attach the narratives and budget narrative as a PDF to the email.

The GOSV estimates that the time required to complete the application and enter the data into eGrants is 80 hours; this timeline may vary based on each applicant's grant development process as well as the eGrants system status and availability.

Applicants are strongly encouraged to write their applications (including narratives and the budget) in a word processing program first and then paste the completed sections into eGrants. Some individual sections, as well as the overall application, have character limits.

TYPES OF FORMULA GRANT APPLICATIONS

I. AmeriCorps*State Formula Planning Grant

Applicants new to AmeriCorps funding may apply for a planning grant of up to \$25,000 in order to explore the need for and feasibility of creating an AmeriCorps program to address a particular community need. A planning grant award does not guarantee the applicant will be awarded an operating grant in future funding cycles.

II. AmeriCorps*State Formula Program Operating Grant

Existing Maryland AmeriCorps grantees and agencies that are new to AmeriCorps funding may be invited by the GOSV to apply for the Formula Program Operating Grant. Applicants are required to match a percentage of the federal funds; and there are minimum and maximum AmeriCorps participant requirements (10 MSY minimum).

Description of AmeriCorps Programs

This funding supports organizations (Grantees) in implementing programs that recruit and enroll participants, called AmeriCorps members, in full-time or less than full-time service positions that address unmet community needs. The Grantee administers a federally funded living allowance to the AmeriCorps members to cover living expenses while they are serving, and certifies the members' eligibility to receive federally funded education awards at the conclusion of their terms of service. The Grantee creates a supportive team-based environment or individual placements in which the members can perform and reflect upon meaningful direct service that helps individuals in need, or improves the natural or urban environment and strengthens communities.

Description of AmeriCorps Member Benefits

Education Benefits: Upon successful completion of a term of service, an AmeriCorps member is entitled to an education award commensurate with the service commitment the member fulfilled. In the 2012 – 2013 grant year, a full-time member earns an award of \$5,550 which can be used to pay educational expenses or to pay existing student loans. The education award is administered by a separate entity, the National Service Trust, and is paid directly to the educational or financial institution. Members have seven years from completion of their terms of service to utilize the education benefit. While a member is serving in AmeriCorps, qualified student loans may be put in Forbearance and the interest may be paid by the Trust. The value of the education benefits are not calculated into the program budget.

Child Care: Child care expenses for income eligible members are paid during a member's term of service by CNCS. The cost of child care is not calculated into the program budget.

Health Care: AmeriCorps Grantees must provide health care benefits to full-time members who do not already possess health care benefits. The health care benefits must meet minimum guidelines. Grantees may choose their own health care benefit provider; or they can utilize a national provider experienced in administering health care benefits for AmeriCorps programs. The cost of member health care is calculated into the program budget.

RECOMMENDATIONS FOR WRITING AN AMERICORPS GRANT APPLICATION

AmeriCorps grant competitions are fierce; each year, there are significantly more applications than available funding will support. It is extremely important that the grant application is thoroughly completed and well-presented. Below are ideas to help you present your project in the best way:

- **Make your grant easy to read.** Follow the application instructions and outline exactly. The grant reviewer scoresheet will follow the instructions and outline exactly. Do not change headings or categories. Put the sections in the correct order, and CAPITALIZE headers to help break up the narrative; eGrants will not allow any type of formatting—use hard returns and capitalization to improve your grant’s readability. If a section does not apply to your application, write N/A.
- **Lead from your agency’s strengths and be explicit.** Do not make the mistake of trying to stretch your proposed program to fit each strategic initiative, special consideration, and priority articulated in this application or in the CNCS *Notice*.
- **Be clear and succinct.** Reviewers are not interested in jargon, boilerplate, rhetoric, or exaggeration. Avoid overusing acronyms. They are interested in learning precisely what you intend to do and how your project responds to the selection criteria.
- **Avoid circular reasoning.** The problem you are addressing should not be described as the lack of the program you are proposing.
- **Don’t make assumptions.** Even if you have received funding from the Corporation or the GOSV in the past, do not assume your reviewers know anything about you, your program, your partners, or your beneficiaries. The application must stand alone and give the full picture of what you aim to achieve with this funding request.
- **Use an impartial proofreader.** Before you submit your application, let someone who is completely unfamiliar with your project read and critique the project narrative.

- **Carefully and fully proofread and edit your grant for spelling, grammar, and punctuation.** Poorly written grant applications do not inspire trust.
- **Preview your grant.** Be sure to preview the full document in eGrants before you submit it to the GOSV. On the grant screen, you will see ‘Review and Submit’ on the left toolbar. Click ‘Review’; then click ‘Application for Federal Assistance’ under the View/Print line in the middle of the screen. This will create a PDF of your entire application. This is the document that grant reviewers will receive; and this is the document you should print out and keep on file. Please scroll through all pages and proof carefully. It is also extremely helpful to space between paragraphs or sections as you prepare the narratives (this white space helps reviewers easily follow your content).

AMERICORPS PLANNING GRANT APPLICATION: ELECTRONIC GRANT SUBMISSION COMPONENTS AND INSTRUCTIONS

Maryland applicants will submit an electronic application in eGrants to the Governor's Office on Service and Volunteerism (GOSV). Log on and create an eGrants account at <https://egrants.cns.gov/espan/main/login.jsp>. The GOSV is identified in eGrants as the Prime Applicant (which means the GOSV submits the completed application directly to the Corporation for National and Community Service). This also means that the GOSV is the recipient of the AmeriCorps*State Formula grant funds from the Corporation; and Maryland applicants will become sub-grantees of the GOSV if selected for funding in the 2012 – 2013 program year.

In case of technical difficulties: Contact the eGrants Help Desk at 800-942-2677 (talk to an associate or leave a detailed message) or go to <http://www.nationalservice.gov/questions> (click Ask a Question) immediately if a problem arises while you are creating your account, preparing, or submitting your application. Be prepared to provide your application ID. If technical issues are preventing you from submitting your application in eGrants by the deadline, you must contact the eGrants Help Desk prior to the April 13, 2012, 5:00 p.m. EST deadline to explain your technical issue and get a ticket number. If your issue cannot be resolved by the deadline, you must continue working with the eGrants Help Desk to submit your application. In addition, send an email to jmendez@gosv.state.md.us to notify the GOSV that you are submitting an application no later than the posted deadline. Attach the narratives and budget narrative as a PDF to the email.

Your application consists of the following components in the on-line submission system. Please make sure to complete each one fully as appropriate for the planning grant application (several sections do not apply). There are character limits for several of the sections (identified further in the instructions); applicants are strongly encouraged to write the application in Word, proof all content thoroughly, and conduct spell and grammar checks before copying and pasting the information into eGrants. From time to time, eGrants has technical failures that cause applications to be lost in part or in full. Creating, editing, and saving in Word will assure that your application will be protected and able to be submitted by the required deadline. Regardless of the status of the eGrants system, no late applications will be accepted by the GOSV.

eGrants Components:

- I. Applicant Info
- II. Application Info
- III. Narratives
- IV. Performance Measures – Planning grant applicants will not complete this section. Enter N/A or 0 in each field.
- V. Documents – N/A for planning grant applicants
- VI. Budget
- VII. Review, Authorize, and Submit
- VIII. Survey on Ensuring Equal Opportunity for Applicants (Optional)

In eGrants, before starting Section I, you will need to:

- Start a New Grant Application,
- Select a Program Area (AmeriCorps),
- Select a NOFA (Commission AmeriCorps State FY 2012),
- Select Maryland, and
- Select the Maryland Prime Application ID 12AC137391 – MD Commission Formula.

I. Planning Grantee Applicant Info

In eGrants, complete the Applicant Info Section (Attachment A). This section is particularly important for Corporation and GOSV data collection and evaluation. Please take the time to reflect your program activities accurately in this section.

- Enter your contact information into the fields that appear.
- Select a primary Program Model, and a secondary Program Model, if appropriate.
- Then select characteristics that fit your project under Program Design, Program Location, and Program Focus. Enter or select a Program Director and Program Website URL.

II. Planning Grantee Application Info

Information entered in the Applicant Info, Application Info, and Budget sections will populate the SF 424 Facesheet, the standard cover sheet for federal grant applications.

In the Application Info Section enter:

- Program/Title (include this on Facesheet, 11.a): PLANNING GRANT <Your Organization's Name>
- Areas affected by your proposed AmeriCorps activity
- Requested project period start and end dates; for planning grantees, the project dates are **September 15, 2012 – August 31, 2013**
- Indicate if you are delinquent on any federal debt
- State Application Identifier: Enter N/A
- State Single Point of Contact: pre-filled “No, this is not applicable”
- Waiver of Volunteer Leveraging Requirements: Do Not Enter

III. Planning Grantee Narratives (25,000 character limit, with spaces)

Provide a narrative that addresses the following elements. You will enter N/A in sections in the eGrants narratives that do not apply to planning grant applicants.

Executive Summary (500 character limit, with spaces)

Provide a brief description of your organization and planning grant goals.

Rationale and Approach

- A. Describe why you are applying for a planning grant and what you hope to achieve during the one-year planning period.
- B. Include the community need you plan to address and documentation of the need.
- C. Describe how AmeriCorps members could help you address the community need, and the target communities you would serve.
- D. Provide a detailed description of your planning process and a timeline for planning activities.
- E. Describe how you will use the planning period to develop your capacity to effectively manage an AmeriCorps program including:
 - Establishing systems and processes for sound programmatic and fiscal oversight;
 - Creating a process for selecting operating and service sites (if applicable) that will ensure the most appropriate and capable organizations are selected;
 - Planning orientation and training for operating and service sites (if applicable);
 - Planning orientation and training for AmeriCorps members; and
 - Ensuring you have the ability to provide or secure effective technical assistance.

Organizational Capability

- A. Provide a brief history of your organization including the year it was established and your funding history with the Corporation and the GOSV, if applicable.
- B. Unless your organization is brand new, describe your record of accomplishment.
- C. Discuss your prior experience in the proposed area of programming and other examples of your organization's leadership in the community.
- D. Describe your organization's management and staff structure and the role the board of directors, administrators, and staff members will play in the planning process.
- E. Special Circumstances: In applying these criteria to each proposal, reviewers may also take into account the following circumstances of individual organizations:
 - The age of your organization and its rate of growth; and
 - Whether your organization serves a resource-poor community, such as a rural or remote community, a community with a high poverty rate, or a community with a scarcity of philanthropic and corporate resources.

If you feel that any of these circumstances have an impact on your organizational capability that has not already been discussed, please describe it.

Cost Effectiveness and Budget Adequacy

Describe your plans to develop a cost-effective program including how you will develop diverse non-federal resources that will support your program implementation and sustainability.

Discuss the adequacy of your budget to support the planning process including your 24% or more commitments of match (cash and in-kind) you have for the planning process, and how you will secure any additional commitments you need for the planning grant.

Evaluation Summary or Plan

Enter N/A

Amendment Justification

Enter N/A

Clarification Information

Enter N/A

Continuation Update

Enter N/A

IV. Planning Grantees Performance Measures

Performance measures are not required for planning grants. Please enter Service Categories, and then enter N/A or 0 in the fields for one aligned performance measure, which is required in order to submit the application. Otherwise, eGrants will continue to give you error messages and prevent submission.

V. Documents**A. Evaluation**

N/A

B. Labor Union Concurrence

N/A

C. Federally-Approved Indirect Cost Agreement

N/A

D. Submission Instructions for Evaluations, Labor Union Concurrence, and Indirect Cost Rates

N/A

E. Pre-Award Costs

N/A

VI. Planning Grant Applicant Budget

A. Overview of Key Budget Requirements

Program requirements, including requirements on match, are located in the AmeriCorps Regulations and summarized below.

Match Requirements in the AmeriCorps Regulations

Competition	Match Requirement
State and Territory Competitive, States and Territories without Commissions, National Direct, National Professional Corps, Indian Tribes, State Formula	Minimum grantee share is 24% of program costs for the grant period. Program grants increase their grantee share over time.
State and National EAP Fixed-Amount	N/A for planning grant applicants

- Equipment costs must not exceed 10% of the total Corporation share.
- If you are applying for the first time, you must match with cash or in-kind contributions at least 24% of the project's total Operating Costs (Section I) plus Member Costs (Section II) plus Administrative Costs (Section III).
- The acceptable sources of matching funds are federal, state, local, private sector, and/or other funds in accordance with applicable AmeriCorps requirements.
- In Section III of the budget, identify the source and total dollar amount of cash match from private, state and local and federal funds, and the source and total amounts of in-kind support. Define all acronyms the first time they are used.

Note: The Corporation's legislation permits the use of non-Corporation federal funds as match for the grantee share of the budget. Please verify that their funds may be used to match an AmeriCorps grant with the other federal agency prior to submitting your application. If your application is approved, the GOSV will require documentation of this verification during the grant period as part of routine fiscal monitoring and grant match documentation.

B. Preparing Your Budget

Your proposed budget should be sufficient to allow you to perform the tasks described in your proposal narrative. Reviewers will consider the information you provide in this section in their assessment of the Cost-Effectiveness and Budget Adequacy selection criteria.

Follow the detailed budget instructions below to prepare your budget. Prepare your budget in the same order as indicated in the Budget Worksheet in Attachment F. The Budget Checklist in Attachment G is a resource for you to ensure your budget is complete. The eGrants system will create the budget and the budget narrative automatically from the detailed budget information you enter. Once you have entered your budget information in eGrants, you will be asked to validate your budget, and eGrants will check your submission for errors. Please be prepared to spend several hours correcting errors and re-validating your eGrants submission; this can be a lengthy process.

As you prepare your budget:

- All the amounts you request must be defined for a particular purpose. Do not include miscellaneous, contingency, or other undefined budget amounts.
- Present the basis for all calculations in the format provided in the GOSV Budget Worksheet.
- Do not include unallowable expenses, e.g., entertainment costs (which include food and beverage costs) unless they are justified as an essential component of an activity.
- Do not include fractional amounts (cents).

Please refer to the relevant OMB Circulars on allowable costs for further guidance. The OMB circulars are online at www.whitehouse.gov/OMB/circulars.

- A-21 - Cost Principles for Educational Institutions, 2 CFR 220
- A-87 - Cost Principles for State, Local, and Indian Tribal Governments, 2 CFR 225
- A-122 - Cost Principles for Nonprofit Organizations, 2 CFR 230

Programs must comply with all applicable federal laws, regulations, and OMB circulars for grant management, allowable costs, and audits, including providing audits to the A-133 clearinghouse if they expend over \$500,000 in federal funds, as required in OMB Circular A-133.

Detailed Budget Instructions

These instructions below have been edited for AmeriCorps Planning Grant Applicants.

Source of Match

In the “Source of Match” field that appears before Section I, enter a brief description of the Source of Match, the amount, the match classification (Cash, In-kind, or Not Available) and Match Source (State/Local, Federal, Private, Other or Not Available). Define acronyms the first time they are used.

Section I. Program Operating Costs

Complete Section I, Program Operating Costs of the Budget Worksheet by entering the “Total Amount,” “CNCS Share,” and “Grantee Share” for Parts A-I, as follows:

A. Personnel Expenses

Under “Position/Title Description,” list each staff position separately and provide position description, salary, and percentage of effort devoted to this award. Each staff person’s role listed in the budget must be described in the application narrative. Because one purpose of this grant is to enable and stimulate volunteer community service, do not include the value of direct community service performed by volunteers. However, you may include the value of volunteer services contributed to the organization for organizational functions such as accounting, audit work, or training of staff. You may not charge AmeriCorps staff members’ time and related expenses for fundraising to the federal or grantee share of the grant. Expenses incurred to raise funds must be paid out of the funds raised. Development officers and fundraising staff are not allowable expenses.

B. Personnel Fringe Benefits

Under “Purpose/Description,” identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker’s Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If a fringe amount is over 30%, please list it separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item.

C. 1. Staff Travel

Describe the purpose for which program staff members will travel. Provide a calculation to include itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff (per the GOSV Budget Worksheet). Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage (not to exceed the federal mileage rate of 55.5 cents/mile for 2012) daily per diem, and similar supporting information. Only domestic travel is allowable.

C. 2. AmeriCorps Member Travel

N/A for planning grant applicants

D. Equipment

N/A for planning grant applicants

E. Supplies

Include the amount of funds to purchase consumable supplies and materials. You must individually list any single item costing \$1,000 or more.

F. Contractual and Consultant Services

Include costs for consultants related to the project’s operations, except training or evaluation consultants, who will be listed in Sections G. or H. below. Payments to individuals for consultant services under this grant may not exceed \$750 per day (excluding costs for indirect expenses, travel, supplies, etc.). The \$750 daily rate is a ceiling. Indicate the daily rate for consultants you are proposing to use and their contractual services. Indicate the daily rate, number of days, and total cost. Include a brief (one sentence) description of the type of service to be provided. Note: costs for fundraising are not allowable.

G. 1. Staff Training

Include the costs associated with training staff on project requirements and training to enhance the skills staff need for effective project implementation, i.e., project or financial management, team building, etc. If using a consultant(s) for training, indicate the estimated daily rate, not to exceed the daily rate limit.

G. 2. AmeriCorps Member Training

N/A for planning grant applicants

H. Evaluation

Include costs for project evaluation activities, including additional staff time or subcontracts, use of evaluation consultants, purchase of instrumentation, and other costs specifically for this activity not budgeted in Personnel Expenses.

I. Other Program Operating Costs

Allowable costs in this budget category should include when applicable: utilities, telephone, Internet, and similar expenses that are specifically used for the grant-funded activities.

Section II. AmeriCorps Member Costs

N/A for planning grant applicants

A. Living Allowance

N/A for planning grant applicants

B. AmeriCorps Member Support Costs

N/A for planning grant applicants

Section III. Administrative/Indirect Costs

N/A for planning grant applicants

Section IV. Increasing Grantee Overall Share of Total Budgeted Costs

N/A for planning grant applicants

Applying for Alternative Match

N/A for planning grant applicants

VII. Review, Authorize, and Submit

The eGrants system will require you to review and verify your entire application before submitting it to the GOSV (called Prime Applicant in eGrants). Before you do this, preview your entire grant application and proof and edit it carefully. To preview your application, click “view/print report” to the right of Application for Federal Assistance under the View/Print Your Application header in the middle of the Review screen. When you choose “view/print report,” a PDF will open that shows you the facesheet, narratives, and performance measures you have entered. Please review each section carefully. Word processing programs will translate in different ways in eGrants, and your grant may contain odd symbols instead of numbers or letters to separate your sections, or the spacing between paragraphs and sections may be too crowded or off entirely. Please remember that the readability of your grant application is very important for reviewers. You will also want to save and print a hard copy of your full application for your records.

You should also preview and print your Budget Narrative before submitting the grant. You’ll find the same type of link on the Review screen for this section of your grant. Carefully proof your budget narrative and save and print a copy for your records as well.

Once you’ve previewed each section, confirmed adequate formatting for your grant, and printed a copy for your records, you will need to complete these steps:

- Review
- Authorize
- Assurances
- Certifications
- Verify
- Submit to Prime

Read the Authorization, Assurances, and Certifications carefully, and complete each section. The person who authorizes the application must be the applicant’s authorized representative or his/her designee and must have an active eGrants account to sign these documents electronically. A copy of the governing body’s authorization for this official representative to sign must be on file in the applicant’s office. Be sure to check your entire application to make sure that there are no errors before submitting it. EGrants will also generate a list of errors if there are sections that need to be corrected prior to submission when you verify the application.

If someone else is acting in the role of the applicant’s authorized representative, that person must log into their eGrants account and proceed with Authorize and Submit. After signing off on the Authorization, Assurances, and Certifications, his/her name will override any that may appear and show on the application as the authorized representative.

The grant is complete when you Submit to Prime and receive a confirmation message from eGrants that the GOSV has received your application. Print and keep this confirmation message on file with your copy of your full grant application.

VIII. Survey on Ensuring Equal Opportunity for Applicants (Optional)

The Corporation and other federal agencies are collaborating with the White House Office of Faith-Based and Community Initiatives to conduct a survey of organizations that apply for federal funding. The purpose of this voluntary information collection is to compile statistics on the types of organizations that apply to the Corporation for funds, such as number of employees, budget size, and self-identification as a faith-based/religious organization or a non-religious community-based organization.

This form is for applicants that are nonprofit private organizations, not including private universities. All information from the attached survey will be confidential and the responses will be aggregated for a summary report. Information provided on your form will not be released and will not be considered in any way in making funding decisions. If you are submitting a hard copy application, the form can be found in Attachment H.

You may complete the survey while preparing your application or after submitting your application.

1. To complete the survey while preparing your application, go to My Account on the main eGrants screen; select Equal Opportunity Survey (on the right side of the screen).
2. If you submit your grant application without completing the survey, a pop-up box will appear and ask you if you would like to complete the survey. You may select Yes, No, or Remind Me Later. If you select Remind Me Later, you will be asked to fill in the survey next time you attempt to submit an application to the Corporation for National and Community Service.

ATTACHMENT A: FACESHEET INSTRUCTIONS

(eGrants Applicant Info and Application Info Sections)

Modified Standard Form 424 (Rev. 11/02 to conform to the Corporation's eGrants system)

This form is required for applications submitted for federal assistance.

Item

1. Filled in for your convenience.
2. Self-explanatory.
3. 3. a. and 3. b. are for state use only (if applicable).
4. Item 4. a: Leave blank.
Item 4. b: If you are a recipient in year 2 or 3 of an already-awarded grant, enter the grant number, otherwise, leave blank.
5. Enter the following information:
 - a. The complete name of the organization that will be legally responsible for the grant, not the name of the organizational unit within the legally responsible organization. (For example, indicate "National University" instead of "Liberal Arts Department.")
 - b. Your organization's DUNS number (received from Dun and Bradstreet). **This is a required field. Please see the Notice for instructions on how to obtain a DUNS number.**
 - c. The name of the primary organizational unit that will undertake the assistance activity, if different from 5. a.
 - d. Your organization's complete address with the 9 digit ZIP+ 4 code.
 - e. The name and contact information of the project director or other person to contact on matters related to this application.
6. Enter your Employer Identification Number (EIN) as assigned by the Internal Revenue Service.
7. Item 7. a.: Enter the appropriate letter in the box.
Item 7. b.: Please enter the characteristic(s) that best describe your organization.

K-12 Education

- 1 School (K-12)
- 2 Local Education Agency
- 3 State Education Agency

Higher Education

- 4 Vocational/Technical College
- 5 Community College
- 6 2-year College
- 7 4-year College
- 8 Hispanic Serving College or University
- 9 Historically Black College or University
- 10 Tribally Controlled College or University

Government

- 23 Local Government-Municipal
- 24 Health Department
- 25 Law Enforcement Agency
- 26 Governor's Office
- 27 State Commission/Alternative Administrative Entity

Non-Profit Organizations

- 11 Community-Based Organization
- 12 Faith-Based Organization
- 13 Chamber of Commerce/ Business Association
- 14 Community Action Agency/ Program
- 15 Service/Civic Organization
- 16 Volunteer Management Organization
- 17 Self-Incorporated Senior Corps Project
- 18 Statewide Association
- 19 National Non-Profit (Multistate)
- 20 Local Affiliate of National Organization
- 21 Tribal Organization (Non-government)
- 22 Other Native American Organization

- 28 Other State Government
- 29 Tribal Government Entity
- 30 Area Agency on Aging
- 31 U.S. Territory

8. Check the appropriate box for type of application and enter the appropriate letter(s) in the lower boxes:

- Check “New” if your organization has never had an AmeriCorps State or National grant before; this also applies to planning grant applications.
- Check “New Application/Previous Grantee” if your organization has had an AmeriCorps State or National grant in the past and the application is for a new grant.

If you are proposing an amendment to your grant, check the type of revision you are submitting.

- A. Select “Augmentation” if you are an AmeriCorps State or National grantee submitting a revised budget to incorporate a Corporation-authorized increase.
 - B. Select “Budget Revision” to make a change in the grant budget, including slots.
 - C. Select “No-cost Extension” to request an extension of the grant period, then enter the extension date requested in the blank following the checkbox. No-cost extensions can be requested only in the third year of the 3-year grant cycle and must be requested before the project period ends.
 - D. Select “Other,” as applicable, and specify in the blank provided.
9. Filled in for your convenience.
10. Use the following list of CFDA (Catalog of Federal Domestic Assistance) numbers for the applicable program listing, or other source if so instructed in the *Notice*: 94.006 AmeriCorps State and National.
11. Enter the project title.
- a. When applying for funding for an existing grantee, use the same title as was used in the prior grant program if appropriate (i.e., if the program is unchanged). For planning grant applicants, the title should be PLANNING GRANT <insert Your Organization’s Name>.
 - b. Enter the name of the Corporation’s program initiative, if any, as provided in the instructions corresponding to the *Notice* for which you are applying; otherwise, leave blank.
12. List only the largest political entities affected (e.g., counties, and cities).
13. (See item 8) “New” application or “New application/previous grantee.” Enter the dates for the proposed project period. Planning grant applicants enter: 9/15/12 – 8/31/13.
- Performance Period: this appears only in eGrants, and is for the use of staff only.
14. Leave blank, staff use only.
15. Estimated Funding. Check the appropriate box to indicate the grant year for which funding is being requested. Enter the amount requested or to be contributed during this budget period on each appropriate line, as shown below. The value of in-kind contributions should be included in these amounts, as applicable. For revisions (See item 8), if the action will result in a dollar change to an existing award, include only the amount of the change. For decreases, enclose the amounts in parentheses.

- | | |
|---------------------|--|
| a. Federal | The total amount of federal funds being requested in the budget. |
| b. Applicant | The total amount of the applicant share as entered in the budget. |
| c. State | The amount of the applicant share that is coming from state sources. |
| d. Local | The amount of the applicant share that is coming from local governmental |

- e. Other** sources (e.g., city, county and other municipal sources).
The amount of the applicant share that is coming from non-governmental sources.
- f. Program Income** The amount of the applicant share that is coming from income generated by programmatic activities (i.e., use of the additive option where program income is used to increase the size of the program).
- g. Total** The applicant's estimate of the total funding amount for the agreement.

16. Pre-filled for your convenience. This program is excluded from coverage by State Executive Order 12372.

17. Check the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit allowances, loans, and taxes. If Yes, attach an explanation.

18. The person who signs this form must be the applicant's authorized representative. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

Note: Falsification or concealment of a material fact, or submission of false, fictitious or fraudulent statements or representations to any department or agency of the United States Government may result in a fine of not more than \$10,000 or imprisonment for not more than five (5) years, or both. (18 U.S. Code Section 1001).

APPLICATION FOR FEDERAL ASSISTANCE

Standard Form 424 (Rev. 9-2003) Prescribed by OMB Circular A-102

1. TYPE OF SUBMISSION:

☒ Application ☒ Non-Construction

2. a. DATE SUBMITTED:

3. a. DATE RECEIVED BY STATE:

3. b. STATE APPLICATION IDENTIFIER:

2. b. APPLICATION IDENTIFIER:

4. a. DATE RECEIVED BY FEDERAL AGENCY:

4. b. FEDERAL IDENTIFIER: (Staff Only)

5. APPLICANT INFORMATION

5. a. LEGAL NAME:

5. b. ORGANIZATIONAL DUNS:

5. c. ORGANIZATIONAL UNIT (DEPARTMENT/DIVISION):

5. d. ADDRESS (give street address, city, county, state and zip code):

STREET:

CITY: COUNTY:

STATE: COUNTRY:

5. e. NAME AND TELEPHONE NUMBER OF PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION (give area code):

NAME:

TELEPHONE NUMBER: () -

FAX NUMBER: () - EMAIL:

6. EMPLOYER IDENTIFICATION NUMBER (EIN):

8. TYPE OF APPLICATION

☐ NEW ☐ NEW/PREVIOUS GRANTEE

☐ CONTINUATION ☐ REVISION

If Revision, enter appropriate letter(s) in box(es):

A. AUGMENTATION

B. BUDGET REVISION:

C. NO COST EXTENSION to (enter date)

E. OTHER (specify below)

7. a. TYPE OF APPLICANT: (enter appropriate letter in box)

A. State

H. Independent School District

B. County

I. State Controlled Institution of Higher Learning

C. Municipal

J. Private University

D. Township

K. Indian Tribe

E. Interstate

L. Individual

F. Intermunicipal

M. Profit Organization

G. Special District

N. Private Non-Profit Organization

O. Federal Government

P. HQ Internal Organizations

Q. State Education Agency

R. Territory

S. Other (specify)

7. b. CNCS APPLICANT CHARACTERISTICS Enter appropriate codes:

9. NAME OF FEDERAL AGENCY:

Corporation for National and Community Service

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

11. a. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

PLANNING GRANT: <insert organization's name>

12. AREAS AFFECTED BY PROJECT (List Cities, Counties, States, etc.):

11. b. CNCS PROGRAM INITIATIVE (IF ANY):

13. PROPOSED PROJECT: START DATE: 9/15/12 ENDING DATE: 8/31/13

14. Performance Period (Staff Use Only)

15. ESTIMATED FUNDING: Check applicable box: Yr 1: ☐ Yr.2: ☐ Yr. 3: ☐

a. FEDERAL

\$

b. APPLICANT

\$

c. STATE

\$

d. LOCAL

\$

e. OTHER

\$

f. PROGRAM INCOME

\$

g. TOTAL

\$

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE

b. NO. ☒ PROGRAM IS NOT COVERED BY E.O. 12372

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

☐ YES If "Yes," attach an explanation. ☐ NO

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. TYPED NAME OF AUTHORIZED REPRESENTATIVE:

b. TITLE:

c. TELEPHONE NUMBER:

d. SIGNATURE OF AUTHORIZED REPRESENTATIVE:

e. DATE SIGNED:

ATTACHMENT B: PROGRAM MODEL, DESIGN, LOCATION, AND FOCUS (eGrants Applicant Info Section)

SECTION I: PROGRAM MODEL

Directions: Choose one primary and one secondary program model, if applicable.

Section I: Project Models (select one for primary and another for secondary)		
	Youth Corps	A full-time year-round youth corps program or full-time summer youth corps program, such as a conservation corps or youth service corps that undertakes meaningful service projects with visible public benefits; includes as participants youths and young adults between the ages of 16 and 25 inclusive, including out-of-school youths and other disadvantaged youths.
	Community Corps	A community corps program that meets unmet human, educational, environmental, or public safety needs and promotes greater community unity through the use of organized teams of participants of varied social and economic backgrounds, skill levels, physical and developmental capabilities, ages, ethnic backgrounds, or genders.
	Campus-based Model	A campus-based program that is designed to provide substantial service in a community during the school term and during summer or other vacation periods through the use of students who are attending an institution of higher education.
	Pre-Professional Corps	A pre-professional training program in which students enrolled in an institution of higher education receive training in specified fields, which may include classes containing service-learning; perform service related to such training outside the classroom during the school term and during summer and other vacation periods; and agree to provide service upon graduation to meet unmet human, educational, environmental, or public safety needs related to such training.
	Professional Corps	A professional corps program that recruits and places qualified participants to meet unmet human, educational, environmental, or public safety needs in communities with an inadequate number of such professionals.
	Entrepreneur Corps	A national service entrepreneur program that identifies, recruits, and trains gifted young adults of all backgrounds and assists them in designing solutions to community problems.
	Intergenerational Program	An intergenerational program that combines students, out-of-school youths, and older adults as participants to provide needed community services, including an intergenerational component for other national service programs described in this subsection.
	Service-Learning Program	A program that provides specialized training to individuals in service-learning and places the individuals after such training in positions, including positions as service-learning coordinators to facilitate service-learning in programs eligible for funding under Learn and Serve America School-Based and Community-Based Grants.
	Rural Corps	A program designed to meet the needs of rural communities, using teams or individual placements to address the development needs of rural communities and to combat rural poverty, including health care, education, and job training.

	Hunger Elimination Program	A program that seeks to eliminate hunger in communities and rural areas through service in projects involving food banks, food pantries, and nonprofit organizations that provide food during emergencies.
--	-----------------------------------	--

SECTION II: PROGRAM DESIGN

Directions: Choose one or more project designs.

Section II: Program Design		
	Team-Based	A program where members regularly function as a team during the service week.
	Individual Placement /Scattered Site	A program that places one or two members at sites in a variety of locations.
	Intermediary Organization	Intermediary organizations provide the mechanism by which a number of community or faith-based organizations or grassroots groups may access AmeriCorps and other Corporation resources. We define intermediaries as national, regional, state, or local organizations that agree to provide the technical and financial support to assist community or faith-based organizations that do not have the capacity to perform these functions. Intermediaries serve as the legal applicant for a Corporation grant, thereby ensuring that the systems to manage a federal grant are in place.
	Statewide Initiative	A program that operates throughout the state and may or may not have a single issue focus.

SECTION III: PROGRAM LOCATION

Directions: Please enter your program's location information.

Geography (please check one)		
	Urban	A program designed to meet the needs of urban communities.
	Rural	A program designed to meet the needs of rural communities.
	Both	A program designed to meet the needs of both urban and rural communities.
		Areas of Need Identification: Check all that apply (optional)
	Areas Affected by Military Downsizing	Areas adversely impacted by reductions in defense spending or the closure or realignment of military installations.
	Empowerment Zones or Redevelopment Areas	Communities designated as empowerment zones or redevelopment areas that are targeted for special economic incentives, or otherwise identifiable as having high concentrations of low-income people.
	Environmentally Distressed Areas	Areas that are environmentally distressed.
	Areas Affected by Management of Federal Lands	Areas adversely affected by federal actions related to the management of federal lands that result in significant regional job losses and economic dislocation.
	Areas with High Unemployment	Areas that have an unemployment rate greater than the national average unemployment for the most recent 12 months for which satisfactory

Geography (please check one)		
	Rates	data are available.

SECTION IV: PROGRAM FOCUS

Directions: Choose one or more program focus areas from below.

Section IV: Program Focus					
	African American community		Pre-school Children		At-Risk Youth
	Asian American community		K-12 Students		Children of Prisoners
	Latin American community		Young Adults (17-24)		Foster Children
	Native American community		College Students		
	Families/Parents		Incarcerated Individuals and Ex-Offenders		Seniors
	Homeless		Low-Income Community		Unemployed
	Homeless Veterans		Low-Income Housing Residents		Veterans
	Immigrants		Mentally/Physically Challenged		Victims/Potential Victims of Crime
			Persons with HIV/AIDS		
	Asset Accumulation	Community and faith-based organizations that conduct activities that empower the poor through asset accumulation programs including home ownership, individual development accounts, and financial literacy.			
	Strengthening Families	Community and faith-based organizations that conduct activities that strengthen families to break the intergenerational cycle of poverty.			

ATTACHMENT C: ISSUE AREAS AND SERVICE CATEGORIES (eGrants Performance Measures Section)

In this section you will select service categories that describe your program activities. First select an issue area, and then choose one or more service categories. When you have selected all applicable service categories, indicate which service category is the primary one by entering a 1 next to the check box, and which is the secondary by entering a 2 next to the checkbox. Only one service category can be indicated as the primary, and one as the secondary.

Issue Areas and Service Categories (Issue Areas in Bold)

☐ **Community and Economic Development**

- ☐ Community-based Volunteer Programs
- ☐ Community Revitalization/Improvement
- ☐ Consumer Education
- ☐ Cooperatives/Credit Unions
- ☐ Food Production/Community Gardens/Farming
- ☐ Job Development/Placement
- ☐ Management Consulting
- ☐ Micro Enterprise
- ☐ Other Economic and Community Development
- ☐ Public Safety
- ☐ Regional/State/City Planning
- ☐ Small/Minority Business Development
- ☐ Social Services Planning & Delivery Systems/Community Organization
- ☐ Tax Counseling/Counseling
- ☐ Technology Access
- ☐ Thrift Store
- ☐ Transportation Services
- ☐ Welfare to Work

☐ **Disaster Recovery/Relief**

- ☐ Disaster Mitigation
- ☐ Disaster Preparedness
- ☐ Disaster Recovery
- ☐ Disaster Response
- ☐ Other Disaster

☐ **Education**

- ☐ Adult Education and Literacy
- ☐ After School Programs
- ☐ America Reads
- ☐ Computer Literacy
- ☐ Cultural Heritage
- ☐ ESL
- ☐ Elementary Education
- ☐ GED/Dropouts
- ☐ Head Start/School Preparedness
- ☐ Job Preparedness/School to Work
- ☐ Library Services
- ☐ Other Education

☐ Pre-Elementary Day Care

- ☐ Secondary Education
- ☐ Service-Learning
- ☐ Special Education
- ☐ Tutoring & Child Literacy—Elementary
- ☐ Tutoring & Child Literacy—High School
- ☐ Tutoring & Child Literacy—Middle School
- ☐ Vocational Education
- ☐ Youth Leadership/Development

☐ **Environment**

- ☐ Clean Air
- ☐ Clean and Safe Water
- ☐ Community Restoration/Clean Up
- ☐ Energy Conservation
- ☐ Environmental Awareness
- ☐ Indoor Environment
- ☐ Other Environment
- ☐ Toxic Waste Management
- ☐ Waste Reduction, Management, and Recycling
- ☐ Wildlife, Land & Vegetation Protection or Restoration

☐ **Health/Nutrition**

- ☐ Boarder Babies
- ☐ CHIOS/SCHIPS
- ☐ Congregate Meals
- ☐ Delivery of Health Services
- ☐ Food Distribution/Collection
- ☐ HIV/AIDS
- ☐ Health Education
- ☐ Health Screening
- ☐ Hospice/Terminally Ill
- ☐ Immunization
- ☐ In-Home Care
- ☐ Maternal/Child Health Services
- ☐ Mental Health
- ☐ Mental Retardation
- ☐ Other Health/Nutrition
- ☐ Physical Disabilities Programs
- ☐ Substance Abuse

☐ **Homeland Security**

- ☐ Disaster Preparedness/Relief
- ☐ Public Health
- ☐ Other Homeland Security
- ☐ Public Safety

☐ **Human Needs**

- ☐ Adoption
- ☐ Adult Day Care/Senior Center
- ☐ Companionship/Outreach
- ☐ Crisis Intervention
- ☐ Intensive Mentoring (at least 1 hour weekly for at least 9 months)
- ☐ Mentoring
- ☐ Other Human Needs
- ☐ Respite
- ☐ Senior Center Program (Non Residential)
- ☐ Senior Citizen Assistance
- ☐ Teen Pregnancy/Abstinence/Parent Support

☐ **Housing**

- ☐ Home Management Support/Education
- ☐ Homeless
- ☐ Housing Referrals/Relocation/Other
- ☐ Housing Rehabilitation/Construction

- ☐ Independent Living—Disabled

- ☐ Independent Living—Seniors

- ☐ Other Housing

- ☐ Tenant Organizing

- ☐ Transitional Housing

☐ **Public Safety**

- ☐ Adult Offender/Ex-Offender Services/Rehabilitation
- ☐ Child Abuse/Neglect
- ☐ Children & Youth Safety Programs
- ☐ Community Policing/Community Patrol
- ☐ Conflict Resolution/Mediation
- ☐ Crime Awareness/Crime Avoidance
- ☐ Elder Abuse/Neglect
- ☐ Family Violence
- ☐ Improvement of Household Security
- ☐ Juvenile Justice, Delinquency, Gangs
- ☐ Legal Assistance
- ☐ Neighborhood Watch/Block Watch
- ☐ Other Public Safety
- ☐ Safe Havens
- ☐ Safety/Fire Prevention/Accident Prevention
- ☐ Sexual Abuse/Rape
- ☐ Victim/Witness Assistance

ATTACHMENT D: PERFORMANCE MEASURE WORKSHEET

Please fill in the performance measure information for each section.
General Info
Performance Measurement Title:
Measure Category (choose one): Needs and Service Activities Participant Development Strengthening Communities
Service Category addressed by this Performance Measure Worksheet (see Attachment D, Service Categories):
Needs and Activities
Briefly describe the need to be addressed (1-3 sentences):
Briefly describe how you will achieve this result (1-3 sentences):
How many AmeriCorps members will be participating in this activity?
How many days per week (on average) will this activity occur?
How many hours per day (on average) will this activity occur?
When does this activity begin?
When does this activity end?
Results
The outputs and outcomes you intend to track for a particular activity:
Result Type
Outputs are counts of the amount of service members or volunteers have completed, but do not provide information on benefits to or other changes in the lives of members and/or beneficiaries.
Intermediate-outcomes specify changes that have occurred in the lives of members and/or beneficiaries, but are short of a significant benefit for them.
Result: Output
Result Statement: 1-2 sentences stating the expected result.
Indicator: A specific, measurable item of information that specifies progress toward achieving a result. Indicator:

Other Indicator:
Targets
Target Description:
(number) or % (percent):
Instruments: Specific tool to collect information (e.g. behavior checklist, tally sheet, attitude questionnaire, interview protocol).
Result: Intermediate Outcome
Result Statement: 1-2 sentences stating the expected result.
Indicator: A specific, measurable item of information that specifies progress toward achieving a result. Indicator:
Other Indicator:
Targets
Target Description:
(number) or % (percent):
Instruments: Specific tool to collect information (e.g. behavior checklist, tally sheet, attitude questionnaire, interview protocol).

ATTACHMENT E: ASSURANCES AND CERTIFICATIONS (eGrants Review, Authorize, and Submit Section)

Instructions

By signing and submitting this application, as the duly authorized representative of the applicant, you certify that the applicant will comply with the Assurances and Certifications described below.

a) Inability to certify

Your inability to provide the assurances and certifications listed below will not necessarily result in denial of a grant. You must submit an explanation of why you cannot do so. We will consider your explanation in determining whether to enter into this transaction. However, your failure to furnish an explanation will disqualify your application.

b) Erroneous certification or assurance

The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

c) Notice of error in certification or assurance

You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

d) Definitions

The terms “covered transaction”, “debarred”, “suspended”, “ineligible”, “lower tier covered transaction”, “participant”, “person”, “primary covered transaction”, “principal”, “proposal”, and “voluntarily excluded” as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. An applicant shall be considered a “prospective primary participant in a covered transaction” as defined in the rules implementing Executive Order 12549. You may contact us for assistance in obtaining a copy of those regulations.

e) Assurance requirement for subgrant agreements

You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

f) Assurance inclusion in subgrant agreements

You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

g) Assurance of subgrant principals

You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

h) Non-assurance in subgrant agreements

If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

i) Prudent person standard

Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

ASSURANCES

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that the applicant:

- Has the legal authority to apply for federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-federal share of project costs) to ensure proper planning, management, and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
- Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of disability (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290dd-3 and 290ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the National and Community Service Act of 1990, as amended; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of federal participation in purchases.
- Will comply with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C 276a and 276a-77), the Copeland Act (40 U.S.C 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for Federally assisted construction sub-agreements.

- Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires the recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved state management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C 1451 et seq.); (f) conformity of federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16U.S.C. 469a-l et seq.).
- Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984, as amended, and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations.
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, application guidelines, and policies governing this program.

For AmeriCorps State/National Applicants ONLY:

- Will comply with all rules regarding prohibited activities, including those stated in applicable Notice, grant provisions, and program regulations, and will ensure that no assistance made available by the Corporation will be used to support any such prohibited activities.
- Will comply with the nondiscrimination provisions in the national service laws, which provide that an individual with responsibility for the operation of a project or program that receives assistance under the national service laws shall not discriminate against a participant in, or member of the staff of, such project or program on the basis of race, color, national origin, sex, age, political affiliation, disability, or on the basis of religion. (NOTE: the prohibition on religious discrimination does not apply to the employment of any staff member paid with non-Corporation funds or paid with Corporation funds but employed with the organization operating the project prior to or on the date the grant was awarded. If your organization is a faith-based organization that makes hiring decisions on the basis of religious belief, your organization may be entitled, under the Religious Freedom Restoration Act, 42 U.S.C. § 2000bb, to receive federal funds and yet maintain that hiring practice, even though the national service legislation includes a restriction on religious discrimination in employment of staff hired to work on a Corporation-funded project and paid with Corporation grant funds. (42 U.S.C. §§ 5057(c) and 12635(c)). For the circumstances under which this may occur, please see the document “Effect of the Religious Freedom Restoration Act on Faith-Based Applicants for Grants” on the Corporation’s website at: <http://www.usdoj.gov/archive/fbci/effect-rfra.pdf>.
- Will comply with all other federal statutes relating to nondiscrimination, including any self-evaluation requirements. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination

on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; and (i) the requirements of any other nondiscrimination statute(s) which may apply to the application.

- Will provide, in the design, recruitment, and operation of any AmeriCorps program, for broad-based input from – (1) the community served, the municipality and government of the county (if appropriate) in which the community is located, and potential participants in the program; and (2) community-based agencies with a demonstrated record of experience in providing services and local labor organizations representing employees of service sponsors, if these entities exist in the area to be served by the program;
- Will, prior to the placement of participants, consult with the appropriate local labor organization, if any, representing employees in the area who are engaged in the same or similar work as that proposed to be carried out by an AmeriCorps program, to ensure compliance with the nondisplacement requirements specified in section 177 of the NCSA;
- Will, in the case of an AmeriCorps program that is not funded through a State, consult with and coordinate activities with the State Commission for the state in which the program operates.
- Will ensure that any national service program carried out by the applicant using assistance provided under section 121 of the National and Community Service Act of 1990 and any national service program supported by a grant made by the applicant using such assistance will address unmet human, educational, environmental, or public safety needs through services that provide a direct benefit to the community in which the service is performed;
- Will comply with the nonduplication and nondisplacement requirements set out in section 177 of the National and Community Service Act of 1990, and in the Corporation's regulations at § 2540.100;
- Will comply with the grievance procedure requirements as set out in section 176(f) of the National and Community Service Act of 1990 and in the Corporation's regulations at 45 CFR § 2540.230;
- Will provide participants in the national service program with the training, skills, and knowledge necessary for the projects that participants are called upon to perform;
- Will provide support services to participants, such as information regarding G.E.D. attainment and post-service employment, and, if appropriate, opportunities for participants to reflect on their service experiences;
- Will arrange for an independent evaluation of any national service program carried out using assistance provided to the applicant under section 121 of the National and Community Service Act of 1990 or, with the approval of the Corporation, conduct an internal evaluation of the program;
- Will apply measurable performance goals and evaluation methods, which are to be used as part of such evaluation to determine the program's impact on communities and persons served by the program, on participants who take part in the projects, and in other such areas as required by the Corporation;
- Will ensure the provision of a living allowance and other benefits to participants as required by the Corporation;
- Has not violated a Federal criminal statute;
- If a state applicant, will ensure that the State subgrants will be used to support national service programs selected by the State on a competitive basis;
- If a state applicant, will seek to ensure an equitable allocation within the State of assistance and approved national service positions, taking into consideration such factors as the locations of the programs, population density, and economic distress;
- If a state applicant, will ensure that not less than 60% of the assistance will be used to make grants to support national service programs other than those carried out by a State agency, unless the Corporation approves otherwise.

CERTIFICATIONS

Certification – Debarment, Suspension, and Other Responsibility Matters

This certification is required by the government-wide regulations implementing Executive Order 12549, Debarment and Suspension, 2 CFR Part 180, Section 180.335, *What information must I provide before entering into a covered transaction with a Federal agency?*

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that neither the applicant nor its principals:

- Is presently excluded or disqualified;
- Has been convicted within the preceding three years of any of the offenses listed in § 180.800(a) or had a civil judgment rendered against it for one of those offenses within that time period;
- Is presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission or any of the offenses listed in § 180.800(a); or
- Has had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

Certification – Drug Free Workplace

This certification is required by the Corporation's regulations implementing sections 5150-5160 of the Drug-Free Workplace Act of 1988 (P.L. 100-690), 45 CFR Part 2545, Subpart B. The regulations require certification by grantees, prior to award, that they will make a good faith effort, on a continuing basis, to maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification may be grounds for suspension of payments, suspension or termination of grants, or government-wide suspension or debarment (see 45 CFR Part 2542, Subparts G and H).

As the duly authorized representative of the grantee, I certify, to the best of my knowledge and belief that the grantee will provide a drug-free workplace by:

- A. Publishing a drug-free workplace statement that:
 - a. Notifies employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace;
 - b. Specifies the actions that the grantee will take against employees for violating that prohibition; and
 - c. Informs employees that, as a condition of employment under any award, each employee will abide by the terms of the statement and notify the grantee in writing if the employee is convicted for a violation of a criminal drug statute occurring in the workplace within five days of the conviction;
- B. Requiring that a copy of the statement described in paragraph (A) be given to each employee who will be engaged in the performance of any Federal award;
- C. Establishing a drug-free awareness program to inform employees about:
 - a. The dangers of drug abuse in the workplace;
 - b. The grantee's policy of maintaining a drug-free workplace;
 - c. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - d. The penalties that the grantee may impose upon them for drug abuse violations occurring in the workplace;
- D. Providing us, as well as any other Federal agency on whose award the convicted employee was working, with written notification within 10 calendar days of learning that an employee has been convicted of a drug violation in the workplace;
- E. Taking one of the following actions within 30 calendar days of learning that an employee has been convicted of a drug violation in the workplace:
 - a. Taking appropriate personnel action against the employee, up to and including termination; or
 - b. Requiring that the employee participate satisfactorily in a drug abuse assistance or rehabilitation program approved for these purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- F. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A) through (E).

Certification - Lobbying Activities

As required by Section 1352, Title 31 of the U.S. Code, as the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that:

- No federal appropriated funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, or modification of any federal contract, grant, loan, or cooperative agreement;
- If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the applicant will submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
- The applicant will require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients will certify and disclose accordingly.

Certification - Grant Review Process (State Commissions Only)

I certify that in conducting our review process, we have ensured compliance with the National and Community Service Act of 1990, the Corporation's peer review requirements, and all state laws and conflict of interest rules.

For AmeriCorps State/National Direct Applicants ONLY:**Erroneous certification or assurance**

The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

Notice of error in certification or assurance

You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

Definitions

The terms "debarment", "suspension", "excluded", "disqualified", "ineligible", "participant", "person", "principal", "proposal", and "voluntarily excluded" as used in this document have the meanings set out in 2 CFR Part 180, subpart I, "Definitions." A transaction shall be considered a "covered transaction" if it meets the definition in 2 CFR part 180 subpart B, "Covered Transactions."

Assurance requirement for subgrant agreements

You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

Assurance inclusion in subgrant agreements

You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

Assurance of subgrant principals

You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

Non-assurance in subgrant agreements

If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

Prudent person standard

Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

SIGNATURES

ASSURANCES:

By signing this assurances page, you certify that you agree to perform all actions and support all intentions in the Assurances section.

Organization Name: _____

Program Name: _____

Name and Title of Authorized Representative:

Signature: _____

Date: _____

CERTIFICATIONS:

By signing this certifications page, you certify that you agree to perform all actions and support all intentions in the Certification sections of this application. The three certifications are:

- Certification: Debarment, Suspension, and Other Responsibility Matters
- Certification: Drug-Free Workplace
- Certification: Lobbying Activities

Organization Name: _____

Program Name: _____

Name and Title of Authorized Representative:

Signature: _____

Date: _____

ATTACHMENT F: BUDGET WORKSHEET (eGrants Budget Section)

Budget calculations must be presented in the formats below (required formats shown in *bold italics*). Several examples are included for reference only; for more examples, refer to the sample AmeriCorps program budget provided at www.GOSV.maryland.gov.

Section I. Program Operating Costs

A. Personnel Expenses

Position/Title/Description	Qty	Annual Salary	% Time	CNCS Share	Grantee Share	Total Amount
Totals						

B. Personnel Fringe Benefits

Purpose/Description	Calculation	CNCS Share	Grantee Share	Total Amount
	<i>Fringe percentage x salary total</i>			
Totals				

C.1. Staff Travel

Purpose	Calculation	CNCS Share	Grantee Share	Total Amount
	<i>Total number of miles x mileage reimbursement rate x number of staff</i>			
Totals				

C. 2. Member Travel

Purpose	Calculation	CNCS Share	Grantee Share	Total Amount
	<i>Total number of miles x mileage reimbursement rate x number of AmeriCorps members</i>			
Totals				

D. Equipment

Item/ Purpose/Justification	Qty	Unit Cost	CNCS Share	Grantee Share	Total Amount
Totals					

E. Supplies

Purpose	Calculation	CNCS Share	Grantee Share	Total Amount
<i>Example: Office supplies – general use</i>	<i>Average amount per month x 12 months: \$50/month x 12 months</i>	<i>\$600</i>		<i>\$600</i>
Totals				

F. Contractual and Consultant Services

Purpose	Calculation	Daily Rate	CNCS Share	Grantee Share	Total Amount
<i>Example: Consultant (strategic planning)</i>	<i>Daily rate x total number of days of work/contract (for year): \$500/day x 10 days</i>		<i>\$5,000</i>		<i>\$5,000</i>
Totals					

G.1. Staff Training

Purpose	Calculation	Daily Rate	CNCS Share	Grantee Share	Total Amount
	<i>Total amount x number of staff</i>				
Totals					

G.2. Member Training

Purpose	Calculation	Daily Rate	CNCS Share	Grantee Share	Total Amount
<i>Example: Member training manual</i>	<i>Total cost per item x number of items needed (for year): \$15/manual x 30 manuals (for 30 AmeriCorps members)</i>		<i>\$450</i>		<i>\$450</i>
Totals					

H. Evaluation

Purpose	Calculation	Daily Rate	CNCS Share	Grantee Share	Total Amount
Totals					

I. Other Program Operating Costs

Purpose	Calculation	Daily Rate	CNCS Share	Grantee Share	Total Amount
			\$1,950		\$1,950
Totals					

Subtotal Section I:	CNCS Share	Grantee Share	Total Amount

Section II. Member Costs**A. Living Allowance**

Item	# Mbrs	Allowance Rate	# w/o Allowance	CNCS Share	Grantee Share	Total Amount
Full Time (1,700 hrs)						
Half Time (900 hrs)						
1 st Year of 2-Year Half Time						
2 nd Year of 2-Year Half Time						
Reduced Half Time (675 hrs)						
Quarter Time (450 hrs)						
Minimum Time (300 hrs)						
Totals						

B. Member Support Costs

Purpose	Calculation	Daily Rate	CNCS Share	Grantee Share	Total Amount
	<i>Cost per item x total number of members</i>				
Totals					

Subtotal Section II:	CNCS Share	Grantee Share	Total Amount
Subtotal Sections I + II:			

Section III. Administrative/Indirect Costs

A. Corporation Fixed Percentage Method

Purpose	Calculation	CNCS Share	Grantee Share	Total Amount
Corporation Fixed Amount:				
Commission Fixed Amount:				
Totals				

B. Federally Approved Indirect Cost Rate Method

Cost Type	Cost Basis	Calculation	Rate	Rate Claimed	CNCS Share	Grantee Share	Total Amount

Total Sections I + II + III:	CNCS Share	Grantee Share	Total Amount

Budget Total: Validate this budget in eGrants.	CNCS Share	Grantee Share	Total Amount
Required Match Percentages:			

ATTACHMENT G: BUDGET CHECKLIST

Below is a checklist to help you make certain that you submit an accurate budget narrative that meets AmeriCorps requirements.

In Compliance?	Section I. Program Operating Costs
Yes ___ No ___	Costs charged under the Personnel line item directly relate to the operation of the AmeriCorps project? Examples include costs for staff that recruit, train, place, or supervise members as well as manage the project.
Yes ___ No ___	Staff indirectly involved in the management or operation of the applicant organization is funded through the administrative cost section (Section III) of the budget? Examples of administrative costs include central management and support functions.
Yes ___ No ___	Staff fundraising expenses are not charged to the grant? You may not charge AmeriCorps staff members' time and related expenses for fundraising to the federal or grantee share of the grant. Expenses incurred to raise funds must be paid out of the funds raised. Development officers and fundraising staff are not allowable expenses.
Yes ___ No ___	Brief position descriptions are provided for each staff member listed in the budget?
Yes ___ No ___	All positions in the budget are fully described in the narrative?
Yes ___ No ___	The types of fringe benefits to be covered and the costs of benefit(s) for each staff position are described? Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If the fringe amount is over 30%, please list separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item?
Yes ___ No ___	Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item?
Yes ___ No ___	The purpose for all staff and member travel is clearly identified?
Yes ___ No ___	You have budgeted funds for staff travel to CNCS sponsored meetings in the budget narrative?
Yes ___ No ___	Funds to pay relocation expenses of AmeriCorps members are not in the federal share of the budget?
Yes ___ No ___	Funds for the purchase of equipment (does not include general use office equipment) are limited to 10% of the total grant amount?
Yes ___ No ___	All single equipment items over \$5,000 per unit are specifically listed?
Yes ___ No ___	Justification/explanation of equipment items is included in the budget narrative?
Yes ___ No ___	All single supply items over \$1,000 per unit are specifically listed?
Yes ___ No ___	You only charged to the federal share of the budget member service gear, with the exception of safety equipment, that includes the AmeriCorps logo?
Yes ___ No ___	Are all consultant services budgeted below the maximum federal daily rate of \$750/day? Is the daily rate noted in all sections of the budget narrative where consultants are proposed?
Yes ___ No ___	Does the budget reflect adequate budgeted costs for project evaluation?
Yes ___ No ___	Have you provided budgeted costs for background checks of members and grant-funded staff that are in covered positions per 45 CFR 2522.205?
Yes ___ No ___	Are all items in the budget narrative itemized and the purpose of the funds justified?

In Compliance?	Section II. Member Costs – N/A for Planning Grant Applicants
Yes ___ No ___	Are the living allowance amounts correct? Full-time AmeriCorps members must receive at least the minimum living allowance as indicated in the chart in the budget instructions. Note: Programs in existence prior to September 21, 1993 may offer a lower living allowance than the minimum. If such a program chooses to offer a living allowance, it is exempt from the minimum requirement, but not from the maximum requirement.
Yes ___ No ___	Living allowances are not paid on an hourly basis? They may be calculated using service hours and program length to derive a weekly or biweekly distribution amount. Divide the distribution in equal increments that are not based on the specified number of hours served.
Yes ___ No ___	Is FICA calculated correctly? You must pay FICA for any member receiving a living allowance. Unless exempted by the IRS, calculate FICA at 7.65% of the total amount of the living allowance.
Yes ___ No ___	Is the Worker's Compensation calculation correct? This is required in Maryland.
Yes ___ No ___	Health care is provided for full-time AmeriCorps members only (unless part-time serving in a full-time capacity)? If your project chooses to provide health care to other half-time members, you may not use federal funds to help pay for any portion of the cost. Projects must provide health care coverage to all full-time members who do not have adequate health care coverage at the time of enrollment or who lose coverage due to participation in the project. In addition, projects must provide coverage if a full-time member loses coverage during the term of service through no deliberate act of his/her own.

In Compliance?	Section III. Administrative/Indirect Costs – N/A for Planning Grant Applicants
Yes ___ No ___	Applicant has chosen Option A – Corporation fixed percentage method and the maximum federal share of administrative costs does not exceed 5% of the total federal funds budgeted?
Yes ___ No ___	Applicant has chosen Option A – Corporation fixed percentage method and the maximum grantee share is at 10% or less of total budgeted funds?
Yes ___ No ___	Applicant has chosen Option B – federally approved indirect cost rate method and documentation on file? Administrative costs budgeted include the following: (1) indirect costs such as legal staff, central management and support functions; (2) costs for financial, accounting, audit, internal evaluations, and contracting functions; (3) costs for insurance that protects the entity that operates the project; and (4) the portion of the salaries and benefits of the director and any other project administrative staff not attributable to the time spent in direct support of a specific project.
Yes ___ No ___	Applicant has chosen Option B – The maximum grantee share is at 10% or less of total budgeted funds, less the 5% CNCS share?

In Compliance?	Match
Yes ___ No ___	Is the overall match being met at the required level, based on the year of funding?
Yes ___ No ___	For all matching funds, the source(s) [private, state and local, and federal], the type of contribution (cash or in-kind), and the amount (or an estimate) of match, are clearly identified in the narrative?



ATTACHMENT H: SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

OMB NO. 1894-0010 EXP 5/31/2009

Purpose: The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey: If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name: _____

Applicant's DUNS Number: _____

Federal Program: _____ **CFDA Number:** _____

1. Has the applicant ever received a grant or contract from the Federal government?

☐

Yes

☐

No

2. Is the applicant a faith-based organization?

☐

Yes

☐

No

3. Is the applicant secular organization?

☐

Yes

☐

No

4. Does the applicant have 501(c)(3) status?

☐

Yes

☐

No

5. Is the applicant a local affiliate of a national organization?

☐

Yes

☐

No

6. How many full-time equivalent employees does the applicant have? (*Check only one box.*)

☐

3 or Fewer

☐

15-50

☐

4-5

☐

51-100

☐

6-14

☐

over 100

7. What is the size of the applicant's annual budget? (*Check only one box.*)

☐

Less Than \$150,000

☐

\$150,000 - \$299,999

☐

\$300,000 - \$499,999

☐

\$500,000 - \$999,999

☐

\$1,000,000 - \$4,999,999

☐

\$5,000,000 or more

Survey Instructions on Ensuring Equal Opportunity for Applicant

Provide the applicant's (organization) name and DUNS number and the grant name and CFDA number.

1. Self-explanatory.
2. Self-identify.
3. Self-identify.
4. 501(c)(3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.
5. Self-explanatory.
6. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.
7. Annual budget means the amount of money your organization spends each year on all of its activities.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **1894-0010**. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: Amy Borgstrom**, Corporation for National and Community Service, 1201 New York Avenue, NW, Washington, D.C. 20525.